\$N 7540-00-634-4176 600-

HEALTH RECORD		CHRONOLOGICAL RECORD OF MEDICAL CARE							
DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)								
Date Time HCP	Family Practice Clinic			31 MDG	Aviar	Aviano AB, Italy			
Tob Y/N _Ppd xyrs PRP Y/N All	S:	y/o m	ale/female	c/o L/R ankle	pain for <u>day</u>	vs. Mechanis	sm of action	1:	
Meds									
	Yes No	o Xray	ordered per	OTTAWA RUI	LES For Orderin	ng Ankle Xra	y On Reve	rse	
	O: Ge	Ankle-	benign nder ter	edematous nder whe	red re	ecc	chymosis		
	ROM-	FRON	Л de	creased					
	Ligam	ents-	intact	+/- drawer					
	Neuro	-	intact	deficits					
	Vascu	lar-	Posterior	tibial Dors	salis pedis				
	X-rays	:/Lab-							
	A: L/	R ankle sj	orain fx_						
	P:								
ATIENT'S IDENTIFIC	P:	this space fo	v Machaniaal	T					
ATIENT'S IDENTIFIC nprint)	CATION (USE	tnis space to	r Mecnanicai	RECORDS MAINTAINED AT: PATIENT'S NAME (Last,	First Middle Initial)			SEX	
				RELATIONSHIP TO SPO		STATUS		RANK/GRADE	
				SPONSOR'S NAME	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	OTATOS	ORGANIZATIO		
					CONVIDENTIFICATIO	N NO	ONGANIZATIO		
				DEPART./SERVICE	SSN/IDENTIFICATIO	N NU.		DATE OF BIRTH	

D/ CI L	OTHER TORIO, DINOROGIO, TINENTIRETT, TINENTIRO ONOMALENTION (OIGH GOOD GIRLY)							
	Continued:							
	The Ottawa Rules for Radiographs in Acute Ankle Injuries:							
-	Y/N 18 years of age and older							
	Y/N Pregnant, if female							
	Y/N presents for the first time for this problem							
	Posterior edge of tip of motion matterial institution in the day of the posterior edge of the of motion matterial institution. Broaterior edge of tip of motion matterial institution in the day of the posterior edge of tip of motion in the day of the posterior edge of the posterior edg							
	Ankle x-rays are only required if there is any pain in the malleolar zone, AND any one of these							
	findings:							
	Y/N Bone tenderness at the posterior edge or tip of the lateral malleolus (A) or							
	Y/N Bone tenderness at the posterior edge or tip of the medial malleolus (B) or							
	Y/N Inability to bear weight both immediately and at the clinic							
	Foot x-rays are only required if there is any pain in the midfoot zone and any one of these							
	findings:							
	Y/N Bone tenderness over the navicular (D) <i>or</i>							
	Y/N Bone tenderness over the base of the 5 th metatarsal C) or							
	Y/N Inability to bear weight both immediately and in the clinic							
	*Inability to bear weight immediately = the patient cannot walk unaided for four steps within the							
	first hour of the injury							
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